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To: Examiner Richard C. Fults	From: Steven Fischman
Fax: 703-872-9326	Pages: 13 pages including cover sheet
Phone:	Date: 6/12/2003
Re: U.S. Serial No. 09/556,725 Group Art Unit: 3628 Docket No. YOR920000148US1 (16415)	CC:

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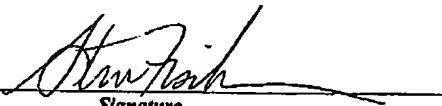
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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Thomas A. Cofino		Docket No. YOR920000148US1 (16415)	
Serial No. 09/556,725	Filing Date April 21, 2000	Examiner Richard C. Fults	Group Art Unit 3628
Invention: BUSINESS METHOD FOR COMPARISON SHOPPING WITH DYNAMIC PRICING OVER A NETWORK			
<p>I hereby certify that this <u>AMENDMENT</u> <i>(Identify type of correspondence)</i></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax: No. <u>703-872-9326</u>)</p> <p>on <u>June 12, 2003</u> <i>(Date)</i></p> <div style="text-align: right; margin-top: 100px;"> <u>Steven Fischman</u> <i>(Typed or Printed Name of Person Signing Certificate)</i>  <i>(Signature)</i> </div>			
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AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. YOR920000148US1 (16415)		
Applicant(s): Thomas A. Cofino					
Serial No. 09/556,725	Filing Date October 21, 1999	Examiner Richard C. Fults	Group Art Unit 3628		
Invention: BUSINESS METHOD FOR COMPARISON SHOPPING WITH DYNAMIC PRICING OVER A NETWORK					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/TBM <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div>					
<div> Signature Steven Fischman Registration No. 34,594 Correspondence Address Customer No. 23389</div>			<div>Dated: June 12, 2003</div> <div style="border: 1px solid black; padding: 5px;"><div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div>_____ Signature of Person Mailing Correspondence</div><div>_____ Typed or Printed Name of Person Mailing Correspondence</div></div>		
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